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Bib Data Sheet

CONFIRMATION NO. 7300

SERIAL NUMBER 10/660,055	FILING OR 371(c) DATE 09/10/2003 RULE	CLASS 709	GROUP ART UNIT 2157	ATTORNEY DOCKET NO. ASTU-001/01US (017622-201)
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APPLICANTS

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**** CONTINUING DATA *******

This appln claims benefit of 60/419,710 10/17/2002

**** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ****
**** 12/02/2003**

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 28	TOTAL CLAIMS 31	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance.				
Verified and Acknowledged <i>S.J.N.</i> Examiner's Signature Initials				

ADDRESS

23419

TITLE

Multi-protocol and multi-format stateful processing

FILING FEE RECEIVED 549	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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